ATTORNEY OR P	ARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY				
_						
TELEPHONE N	O. (Optional): FAX NO. (Optional):					
E-MAIL ADDRE	SS (Optional):					
ATTORNEY	FOR (Name):					
SUPERIOR C	OURT OF CALIFORNIA, COUNTY OF					
STREET AD	DRESS:					
MAILING ADI	DRESS:					
CITY AND ZIP	CODE:					
BRANCH	NAME:					
PETITIC	MER.					
1 211110	NVLI I.					
RESPONE	DENT:					
			CASE NUMBER:			
	PROOF OF SERVICE OF SUMMONS					
1. At the tima. b.	e of service I was at least 18 years of age and not a party Family Law: <i>Petition</i> (form FL-100), <i>Summons</i> (form FL —or— Uniform Parentage: <i>Petition to Establish Parental Rela</i> <i>Response to Petition to Establish Parental Relationship</i>	-110), and blank <i>Res</i> tionship (form FL-200	eponse (form FL-120)			
	·	5 (101111 1 L LL0)				
	-or-					
c	c Custody and Support: Petition for Custody and Support of Minor Children (form FL-260), Summons (form FL-210), and blank Response to Petition for Custody and Support of Minor Children (form FL-270)					
	and					
. —	(1)	(E) .				
d	(1) completed and blank Declaration Under		eted and blank Financial Statement			
	Uniform Child Custody Jurisdiction and Enforcement Act (form FL-105)		ified) (form FL-155)			
		· / ·	eted and blank <i>Property Declaration</i>			
	(2) completed and blank Declaration of Disclosure (form FL-140)	 `	FL-160)			
			to Show Cause (form FL-300), Application der and Supporting Declaration (form			
	(3) completed and blank Schedule of Assets and Debts (form FL-142)	FL-310	0), and blank Responsive Declaration to			
	(4) completed and blank <i>Income and</i>	FL-320	to Show Cause or Notice of Motion (form			
	Expense Declaration (form FL-150)		(specify):			
		<u> </u>				
2. Address v	where respondent was served:					
3. I served t	he respondent (check proper box):					
		n the recognition (C	do Civ. Drog. S. 445.40\			
а	a. Personal service by personally delivering the copies on the respondent (Code Civ. Proc., § 415.10)					
	(1) on (date): (2) at (time):					
b	Substituted service by leaving the copies with or in the	e presence of (name	and title or relationship to respondent):			
	(1) (hundred)					
	(1) (business) a person at least 18 years of age apparently in charge at the office or usual place of business of the respondent. I informed him or her of the general nature of the papers.					
	(2) (home) a competent member of the household (at least 18 years of age) at the dwelling house or usual place of abode of the respondent. I informed him or her of the general nature of the papers.					

	PE	TITIONER:		CASE NUMBER:	
	RESF	PONDENT:			
3.	b.	(3) on (date):	at (time):		
	(4) I thereafter mailed (by first-class, postage prepaid) copies to the respondent at the place where the copies were left. (Code Civ. Procedure 415.20b) on (date):				
	(5) A declaration of diligence is attached stating actions taken to first attempt personal service.				
	c. Mail and acknowledgement service by mailing the copies to the respondent, addressed as shown in item 2, by first-class mail, postage prepaid,				
		(1) on (date):	(2) fr	rom <i>(city):</i>	
		·		(form 982(a)(4)) and a postage-paid return nowledgement of Receipt (form 982(a)(4).)	
			e California (by registered or certified mail er evidence of actual delivery to the respon	with return receipt requested) (Attach signed dent.) (Code Civ. Procedure, § 415.40)	
	d. other (specify code section): Additional page is attached.				
4.	The NOTICE TO THE PERSON SERVED on the summons was completed as follows (Code Civ. Procedure, §§ 412.30, 415.10, and 474):				
	a.	as an individual			
	b.	on behalf of respondent who is		(O. d. Oir. Burnedows (A40.70)	
		Individual (Code Civ. Pr Minor (Code Civ. Proce		vatee (Code Civ. Procedure § 416.70)	
5.	5. Person who served papers Name: Address:				
	Tele	ephone number:			
	l am:				
	 a. Exempt from registration under Business and Professions Code section 22350(b). b. Not a registered California process server. 				
	c. Registered California process server.				
		(1) Employee or indepe(2) Registration no.:	ndent contractor.		
		(3) County:			
	d.	The fee for service was: \$			
6.		I declare under penalty of perjury u	under the laws of the State of California tha	t the foregoing is true and correct.	
		or			
7.		I am a California sheriff, marshal	, or constable and I certify that the forego	ing is true and correct.	
Date:					
		(NAME OF PERSON WHO SERVED PAPER)	(5)	NATURE OF PERSON WHO SERVED PAPERS)	